

# REVOCATION FORM FOR REMOVING CONSULTANTS AS AUTHORIZED RP AGENTS

FACILITY GLOBAL ID #:

SITE OWNER, OPERATOR, OR RESPONSIBLE PERSON (RP) AND ADDRESS::

FACILITY/ LEAK SITE ADDRESS:      CITY      STATE      ZIP CODE

The above identified person does hereby revoke the access authorization for:

DESIGNATED AUTHORIZED REPRESENTATIVE NAME:

COMPANY NAME:

COMPANY ADDRESS      CITY      STATE      ZIP CODE

to upload electronic data to the GeoTracker database of analytical and survey data pertaining to the site identified above.

This Revocation of Authority for designation of a representative shall become effective on the date of execution and shall remain in effect until terminated, in writing, by the above-named owner / operator or responsible person.

EXECUTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_  
OWNER / OPERATOR OR RP SIGNATURE

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
OWNER / OPERATOR OR RP NAME

**Mail or FAX to:**  
**Michelle Tillery - (916) 341-5808**  
**Waterboards**  
**P.O. Box 2231**  
**Sacramento, CA 95812**  
**Phone: (916) 552-9258**